



Paid 1025⁰⁰ - 7/01/2014 sm

Administrative Review Team | June 2012

Case # 14 - 065 MPR

APPLICATION FOR DEVELOPMENT

PLEASE CHECK THE TYPE OF REVIEW

- ☐ West Innovation Districts
(Zoning Code Sections 153.037 - 153.043)
- ☒ Bridge Street Corridor Districts
(Zoning Code Sections 153.057 - 153.066)
- ☐ Wireless Communication Facility (Chapter 99)

PLEASE CHECK THE APPLICATION TYPE

- ☐ Basic Plan Review
- ☒ Minor Project
- ☐ Development Plan Review
- ☐ Site Plan Review
- ☐ Waiver Review
- ☐ Master Sign Plan
- ☐ Open Space Fee-in-Lieu
- ☐ Parking Plan
- ☐ City Council Appeal
- ☐ Administrative Departure

Wireless Applications

- ☐ New Tower
- ☐ Co-Location
- ☐ Alternative Structure
- ☐ Temporary

The following applications require review and decision by the **Planning and Zoning Commission, Board of Zoning Appeals, or Architectural Review Board**, but may be submitted concurrently with another application.

Check any that apply:

- ☐ Conditional Use
- ☐ Rezoning
- ☐ Administrative Appeal
- ☐ Project involving modifications to property within the Architectural Review District
- ☐ Other: _____

SUBMISSION REQUIREMENTS

- ☒ **Fee** (refer to the approved fees list)
- ☒ **Electronic Copies** of all application materials (PDF, JPEG, Word, etc. as appropriate)
- ☒ **Submission Requirements** for each type of application (refer to checklists)
- ☒ **Legal Description and/or Property Survey** for the subject property

I. PROPERTY INFORMATION: Provide information to identify properties and the proposed development. Attach additional sheets if necessary.

Property Address(es): <u>Riverside Dr. (Auditor)</u>	
Tax ID/Parcel Number(s): <u>273-012446</u>	Parcel Size(s) in Acres: <u>6.3 Acres</u>
Existing Land Use/Development: <u>Nursing Facility</u>	Zoning District: <u>BSC- Office Residential</u>

☐ Check this box if any **Administrative Departures** are requested and attach an Administrative Departure request form.

☐ Check this box if any **Waivers** are requested as part of the application for development and attach a Waiver Request form.

II. PROPERTY OWNER INFORMATION: Indicate the person(s) or organization(s) who own the property proposed for development. Attach additional pages if there are multiple property owners.

Name (Individual or Organization): <u>Vrable Land Holding, Dublin LLC</u> <u>ATTN: James R. Muckle</u>	
Mailing Address: <u>3248 Henderson Rd.</u> <u>Columbus, Ohio 43220</u>	
Daytime Telephone: <u>614-545-5524</u>	Fax: <u>614-545-5542</u>
Email or Alternate Contact Information: <u>jrmuckle@vrablehealthcare.com</u>	

FOR OFFICE USE ONLY: DIRECTOR'S ACCEPTANCE

Date of Acceptance:	Next Decision Due Date:
Final Date of Decision:	Determination:
Director's (or Designee's) Signature:	

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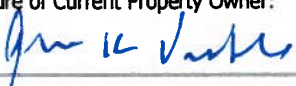
III. APPLICANT(S): Indicate person(s) submitting the application if different than the property owner(s).

Name: (Individual or Organization) Linda Menerey, PLA, ASLA	
Mailing Address: 5500 New Albany Rd., Columbus, Ohio 43054	
Daytime Telephone: 614-775-4710	Fax:
Email or Alternate Contact Information: lmenerey@emht.com	


IV. AUTHORIZED REPRESENTATIVE(S): Indicate the person(s) authorized to represent the property owner and/or applicants.

Name: (Individual or Organization) James R. Muckle - Vrable Healthcare	
Mailing Address: 3248 Henderson Rd., Columbus, Ohio 43220	
Daytime Telephone: 614-545-5524	Fax: 614-545-5542
Email or Alternate Contact Information: jrmuckle@vrablehealthcare.com	


V. AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVE(S): Complete if applicable.

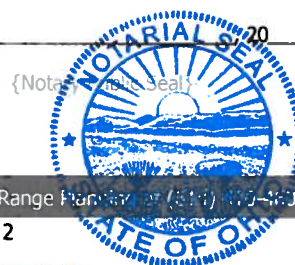
I, <u>Vrable Land Holding, Dublin, LLC</u> , the owner, hereby authorize <u>James R. Muckle, General Manager</u> to act as a representative(s) in all matters pertaining to the processing and approval of this application, including modifying the application. I agree to be bound by all representations and agreements made by the designated representative.	
Signature of Current Property Owner: 	Date: <u>6/24/14</u>
<input type="checkbox"/> Check this box if the original Authorization for Owner's Applicant(s)/Representative(s) is attached as a separate document.	

VI. AUTHORIZATION TO VISIT THE PROPERTY: Site visits to the property by City representatives are essential to process this application. The Owner/Applicant, as noted below, hereby authorizes City representatives to enter, photograph and post a notice on the property described in this application. This is optional, but recommended.

I, <u>James R. Muckle</u> , the owner or authorized representative , hereby authorize City representatives to enter, photograph and/or post a notice on the property described in this application.	
Signature of Owner or Authorized Representative: 	Date: <u>6/24/14</u>

VII. APPLICANT'S AFFIDAVIT: This section must be completed and notarized.

I, <u>James R. Muckle</u> , the owner or authorized representative , have read and understand the contents of this application. The information contained in this application, attached exhibits and other information submitted, is complete and in all respects true and correct, to the best of my knowledge and belief.	
Signature of Current Property Owner or Authorized Representative: 	Date: <u>6/24/14</u>

☐ Check this box if the Applicant's Affidavit and Acknowledgement is attached as a separate document.Subscribed and sworn to before me this 24th day of June, 2014State of OhioCounty of Franklin

Corey J. Ohalek, Esq.
Attorney At Law
Notary Public, State of Ohio
My commission has no expiration date

For questions or more information, please contact Land Use and Long Range Planning at (614) 522-3300 | www.dublin.oh.us

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Vrable Healthcare:

June 30, 2014

Minor Project Review: Project Description

Project Overview:

The Vrable Healthcare project, currently under construction, consists of a single facility containing skilled nursing, rehabilitation and assisted living. The facility is located on a +/- 6.3 acre parcel along Tuller Road and Tuller Ridge Drive and the future Mooney Street and John Shields Parkway. A Final Development Plan was approved for the project early in 2013.

The owner has made a decision to add child daycare center within the facility to provide employees with an onsite childcare option. The general public will be able to utilize the daycare center as well. Anticipated hours of operation are from 6:30 am to 7:30 pm. The owner anticipates the facility to be open at least 5 days a week and potentially 7 days a week depending on usage and demand.

The daycare will provide an outdoor play area along the west side of the building, immediately adjacent to the interior location of the daycare center. The exterior play area would contain a play structure (suitable to meet state guidelines), benches, fencing and additional landscaping. The approved building façade would be slightly modified to remove a window and add a door to the west façade to accommodate access to the outdoor play area for the daycare.

Modifications would be made to the northwest portion of the site adjacent to the loading area where the employee entrance is located. This entrance would also serve as the daycare entrance. Modifications in this area include the designation of 8 parking spaces for short term parking for daycare drop-off and pick-up, sidewalk extensions and crosswalk markings along the loading dock drive. Directional signs would also be added for appropriate wayfinding as necessary.

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Letter of Transmittal

To: Jennifer M. Rauch, AICP
City of Dublin
Land Use and Long Range Planning
5800 Shier Rings Road
Dublin, Ohio 43016-1236

From: Linda Menerey, PLA, ASLA
Date: 06/30/2014
Job no.: 2011-0454
Subject: Vrable Final Development Plan

We are sending you herewith via: ☒ Courier ☐ U.S. Mail ☐ Fed Ex

The following items: ☒ copies ☐ originals ☐ [other]

Copies	Date	Description
10	6/30/2014	Final Plat (Full size)
10	6/30/2014	Final Plat (Half size)
1	6/30/2014	CD with Plans
1		Check
1		Signed Application
1		Project Description
1		Legal Plat

These are transmitted as checked below:

☐ for approval ☐ for your file ☐ as requested ☒ for review & comment
☐ for execution / signature ☐ [other]

Remarks:

Copies:

For EMH&T:

Linda Menerey

If enclosures are not as noted, kindly notify us at once.

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